

L09000087485

Ala incorporation kits Se

105652811

p.1

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H09000198596 3)))



H090001985963ABCE

**Note: DO NOT** hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : CSH SERVICES, LLC  
Account Number : 120070000160  
Phone : (800) 494-3124  
Fax Number : (561) 455-9885

FILED  
09 SEP 10 AM 8:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**THE BOAR'S NEST, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

RECEIVED  
09 SEP 10 PM 12:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN

SEP 11 2009

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

#-090001985963.

**ARTICLES OF ORGANIZATION FOR A  
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

**ARTICLE I NAME**

The name of the Limited Liability Company is:

THE BOAR'S NEST, LLC

**ARTICLE II ADDRESS**The mailing address and street address of the principal office of  
Limited Liability Company is:14400 E HIGHWAY 40  
SILVER SPRINGS, FLORIDA 34488**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT SIGNATURE**

The name and the Florida street address of the registered agent are:

JOANN E STORK  
2600 SE 183RD AVE RD  
OCKLAWAHA, FLORIDA 32179

Having been named as registered agent to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

x JoAnn E. Stork

JOANN E STORK / Registered Agent's signature

#-090001985963.

FILED  
09 SEP 10 AM 8:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

7-090001985963

PAGE 2 THE BOAR'S NEST, LLC

**ARTICLE IV MANAGEMENT**

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

**ARTICLE V MEMBERS (optional)**

MANAGING MEMBER  
JOANN E STORK  
2600 SE 183RD AVE RD  
OCKLAWAHA, FLORIDA 32179

FILED  
09 SEP 10 AM 8:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

.....  
X JoAnn E Stork

Signature of a member or an authorized representative of a member  
(In accordance with section 608.408(3), Florida Statutes, the  
execution of this document constitutes an affirmation under the  
penalties of perjury that the facts stated herein are true.

JOANN E STORK

7-090001985963